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ABSTRACT

One component of the final report of a 3-year project to train speech language pathologists and audiologists to deliver services to young children (birth to age 5) with communication disorders, the paper provides a review of mainstreaming and an indepth view of its application at one center in Colorado serving young children with communication disorders. A brief review of the literature on mainstreaming precedes the description of the laboratory school program. Results of interviewing four preschool staff members regarding their perspective on mainstreaming indicated such benefits as observational learning by the handicapped child, improved self esteem for the handicapped child, improved speech/language development, improved cognitive development, more real world experience, and better parent training and support. Disadvantages of mainstreaming identified by interviewees included rejection of the special child by normal children and difficulty keeping up with the rapid pace in the mainstreamed setting. The importance of educator training for effective mainstreaming was stressed by all interviewees. Worksheets for program evaluation by teachers and directors are appended. (DB)

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The Mainstreamed Laboratory Preschool: A Training Site

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Final Report for the United States Department of Education: Special Project for the Preparation of Speech Pathologists and Audiologists to Provide Competent Services to Handicapped Children, Birth to Age 5.
Competition: 84-029K Special Projects

EC 210378

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I. A Review of the Literature on Mainstreaming

The following is an overview of several studies which examine the efficacy of mainstreaming. Some of the advantages of mainstreaming cited include social integration of handicapped children and imitation of more advanced peer models in play and language behavior. A study of the effects of integration on normally developing children concludes that integration with handicapped children does not have a negative effect on the development of the normal peers.

A study by Peterson and Haralick (1977) investigated the play behavior and social interactions of handicapped and nonhandicapped preschoolers in an integrated classroom during free play. They concluded that the handicapped children were socially integrated in that setting: in 51.9% of the 1322 total nonisolate play interactions, the nonhandicapped children chose to play with their handicapped peers.

Herink and Lee (1985), studied social interactions in 19 Headstart preschool classrooms. They concluded that the handicapped children were "substantially integrated" in both the emotional and social life of the classroom. Herink and Lee (1985) found that the mildly and moderately retarded children in these classrooms took the initiative in 54% of their social interaction with peers; the nonhandicapped children took the initiative in approximately 50% of the interactions with their handicapped peers. In other words, the handicapped children were not avoided or ignored by the

nonhandicapped group. The affective tone of social interactions was also examined in this study; it was found that the handicapped children experienced about the same percentage of positive and negative social interactions with peers as the nonhandicapped children did, thus they " participated equally in the affective social life" with their peers.

Handicapped children can benefit from integration with nonhandicapped peers by observing and imitating their more advanced play behaviors. Subsequently, the handicapped child's cognitive development is likely to be enhanced by imitation of normally developing peers in play. Two experiments reported by Peck, Apolloni, Cooke, and Raver (1978) examined the effects of training developmentally delayed preschoolers to imitate the free play behavior of normally developing classmates. These researchers found that simply placing handicapped and nonhandicapped preschool children together did not lead to a significant amount of social interaction between the two groups. In the experiments, adults provided prompting and social reinforcement to increase the amount of imitation of nonhandicapped children by the handicapped children and the amount of social interaction between the two groups during free play. Once the prompting and social reinforcement by the adults was removed, the handicapped children continued to imitate and interact socially with their nonhandicapped classmates. In the second experiment, the amount of imitation which generalized to other play situations increased. The experimenters offered several explanations for this. Perhaps the

increased imitation was due to the fact that the nonhandicapped peers were closer in age to their handicapped classmates in the second study. In addition, the materials in the second experiment required less fine motor coordination than those in the first experiment, thus were more suitable for the abilities of the developmentally delayed children and more likely to result in successful experiences. Thus age of peers and the type of materials available may affect the success of mainstreaming with respect to the amount of imitation of play behavior exhibited by handicapped children. The writer would like to add that immediate imitation of play behavior was examined in this study, and no mention was made of the possible positive effects of delayed imitation. Delayed imitation of peer models in play by speech and language delayed children has been observed by teachers in the Child Language Center.

Guralnick (1976) conducted a study to examine the value of integrating handicapped and nonhandicapped preschoolers. He also found that interactions require facilitation in order for handicapped children to benefit from peer modelling. In these experiments, the nonhandicapped peers were instructed in attending to the handicapped children's appropriate behaviors and in encouraging the handicapped children to interact with them. This resulted in increased interaction between the handicapped and nonhandicapped children, and more social play and verbalization from the handicapped play partners. In the second experiment, the nonhandicapped children were trained to utilize specific types of verbal

constructions. They then played with their handicapped peers, and the nonhandicapped children's modelling of the trained verbalization resulted in greater usage of those constructions by the handicapped children. Guralnick concluded that normally developing children can be used as learning resources by their handicapped peers. Such a resource would not be as readily available to the handicapped child without mainstreaming.

The attitudes of parents of both nonhandicapped and handicapped children toward mainstreaming were examined in a study by Bailey and Winton (1987). The parents all had children participating in a mainstreamed preschool. Parents in both group agreed that "exposure to the real world" and "community acceptance" for the handicapped were the greatest advantages of mainstreaming. Once their children had participated in the program, the parents of nonhandicapped children became less concerned about the possible drawbacks of mainstreaming.

A study by Odem, Deklyen, and Jenkins (1984) examined the effects of integration on normally developing preschoolers who were placed in a class consisting primarily of handicapped children for one academic year. Their performances on a battery of developmental tests both before and after the school years were compared with the performances of a control group of normally developing children who were matched for age and sex, and placed in a classroom with only normally developing peers. The results of the test batteries at the end of the academic year showed no significant

differences between the two groups. The researchers concluded that the normally developing children who had been placed in the integrated classroom had not experienced setbacks in their development resulting from their interactions with their handicapped peers.

II. The Child Language Center: The Mainstreamed Laboratory: A Training Site

A. A Philosophical Statement

The Child Language Center program at the University of Colorado, Boulder, is an integral part of the Department of Communication Disorders and Speech Science. Its mission is to provide a high quality developmental program for young children and their families; to create a preschool laboratory practicum experience for the graduate and undergraduate speech-language pathologists, audiologists, and other professionals in training; toe mainstream an equal number of language delayed and hearing impaired children into the preschool and to serve as a valuable resource for research, observation, participation courses, and community outreach.

The goal of the program is to help each child grow toward increasing physical, emotional, intellectual, and social competence. The environment and program are carefully planned to meet the needs of young children for play, companionship, and individual attention. The program is flexible and recognizes the importance of each child as a distinct person, developing at his own pace. The program provides organized activities as well as free play indoors

and out.

For each child, school means being in a group of children much like himself, but different, as all people differ. It means sharing space, equipment, and attention. It means learning to accept decisions and necessary limits set by understanding adults. It means exploring, experimenting, and finding relationships as he deals directly with materials through play... the young child's path to learning and discovery. It means having the freedom to play alone or with peers. It means trying out one's wings away from home and learning to trust other adults and feel competent in oneself.

Our approach is based on a developmental-interaction model. Developmental refers to the predictable ages and stages of a child's physical, cognitive, social, and emotional growth. We also believe that children... like adults... are internally driven to explore, interact, and learn about their world. Our role as the adults in their lives is to provide rich, quality experiences that will facilitate growth by responding at the child's level of development.

B. Staff Interviews

Four preschool staff members were individually interviewed regarding their perspective on mainstreaming. The following information is based on their experience in the Child Language Center in the Department of Communication Disorders and Speech Science at the University of Colorado, Boulder and in the Early Childhood Language Center at the

University of Denver. Marillyn Atchison (Early Childhood Specialist) and Eileen Conroy (Speech-Language Pathologist) were the team educators in the classroom. Sheila Goetz (Speech-language Pathologist) and Sue McCord (Early Childhood Specialist) were the team administrators in charge of supervision and leadership in their professional areas for the Child Language Center and all students in training.

The children that comprise the Child Language Center are diverse in nature. Their special needs range from articulation difficulties, Downs syndrome, autism, processing, sensory integration, developmental delays across the board and an equally unique number of personality/temperament diversities among the peer models.

With this information as a background, the following is a compilation of the CLC staff members' views on mainstreaming:

Benefits of mainstreaming:

Observation: All of the interviewees feel that mainstreaming is beneficial for the children in the Child Language Center. The greatest benefit for the special needs child is the learning acquired through observing peer models and being part of a natural, ongoing social group. The greatest benefit for the peer models in the mainstreamed setting is learning to accept differences in others. Teachers provide models of acceptance by seeing each child's strengths, fostering each child's contributions, and making it evident that every child is valued and respected. The teacher is open about a child's special need, facilitates

the other child's understanding of what that handicap means to him, and makes them aware of how they can help ("Tommy has a hard time hearing; we can help him by making sure he can see our face when we're talking."). This can be done as issues arise, on an individual basis.

The parents also learn about differences and similarities in development for special needs children and peer models through the parent program, support groups, social gatherings, and the daily observations as they linger in the halls delivering and picking up their children. They learn to support each other as they realize that all parents struggle with the issues of child rearing regardless of their child's abilities.

Self esteem: All of those interviewed believe that mainstreaming has a positive effect on the special need child's self esteem. In the mainstreamed setting, self esteem can be improved when self-directed learning is encouraged and when special needs children are challenged and supported to succeed. Self esteem is strengthened when children are provided with an environment, atmosphere and people they can trust. It was experienced by the interviewees that mainstreaming reduces the special need child's inhibitions about interacting with peers when understanding adults are available and can model and encourage all children to view themselves as a vital part of the group! In this atmosphere the emotional and social potential of each child is fostered.

Speech-Language: All of the interviewees agreed that mainstreaming is beneficial for the special need child's development of speech and language skills for a variety of reasons. Again, appropriate models are provided by the peer group. Speech and language models provided by peers may be more age appropriate than those provided by adults, in terms of rate, content, and length. The special needs child has more opportunities to use speech and language because it is expected in the mainstreamed setting. Peer models are more accepting of the limited speech and language skills of the special needs children, so that the latter are less inhibited about communicating. The special needs child in this setting have a greater desire to communicate.

Development: All of the interviewees agreed that the special needs child's cognitive development benefits from mainstreaming. Various reasons were cited: peer models provide a higher level of play than the special needs child might otherwise be exposed to in a self-contained setting; more natural play opportunities are offered in the mainstreamed setting; and activities can be made available which encourage the special needs child to join in play at his own level, while observing his peer models sharing the same play theme at a more complex level. Furthermore the teachers in this mainstreamed preschool have had experience working with all children and their understanding of normal development helps them to have more appropriate expectations for the special need child's cognitive development as well as all of the other core areas of the child's development.

Real world experience: All of those interviewed agreed that mainstreaming helps to prepare the special needs child for the "real world." In this emotionally supportive preschool setting, the child is exposed to a wide variety of people and experiences where he can safely practice and learn to deal more effectively with his frustrations. The number of well-trained adults in the classroom is a critical factor and makes it possible to intervene sensitively before all the children concerned feel out of control.

Parents: In order to maximize the benefits of mainstreaming for all of the families the interviewees agreed that the educational and small support groups for parents were very helpful. The parent training provided a more effective way of communicating with one's child and was a benefit to many of the CLC parents. (This program is elaborated in the section on the Parent Training Practicum.) The common goals shared by the parents that were working together on fund raisers, car pooling, potlucks, and interest groups were a unifying factor available to all families. Having a staff who believes in the importance of the families involvement and a specific person assigned to the role of a parent coordinator was a boast to all the efforts in this direction.

Disadvantages of Mainstreaming:

Rejection: Rejection is not limited to the special needs child at this age as all children struggle to be accepted by their peers. In the CLC, the adults continuously model by their daily actions that each child is val-

ued and respected and a very clear message, that teasing is not tolerated, is demonstrated from day one. When children from an early age are helped to understand all of our differences and similarities they soon learn to be more accepting. It is a slow, deliberate process for everyone.

Pace: It was suggested that the pace may be too rapid for some special needs children in the mainstreamed setting because of the needs to accomodate the peer models. This can be particularly true at large group time if the "agenda' for that gathering is not carefully thought through, conducted with skill, and sensitive to the needs of all the children.

Independence: Other concerns for the peer models in the mainstreamed setting might include less independence when there is a greater number of adults in the classroom and the issue of providing unique challenges for the children who grasp information easily and need to be nudged along at a different pace. This takes constant monitoring.

Attention: When asked if, in the mainstreamed setting, special needs children do not get as much attention as they need, the interviewees agreed that this has not been a problem in the CLC. The number of adults in the room, due to the CLC training program, does help to spread the tangible support need for particular children. Peer modeling also appears to compensate where this is a problem because the special needs child is more motivated to imitate peer models than to respond to directions given by an adult.

C. Training of Educators for the Mainstreamed Setting

All of the interviewees agreed that educator[1] training is an essential part of making the mainstreamed classroom an effective, positive learning environment. Included in the training should be:

1. background knowledge of normal development and a keen ability to observe and critique;

2. in class, supervised experience

3. model teachers with a strong background in early childhood development

4. a team approach with a speech-language pathologist in the classroom and on-going consultantships with an O.T. or P.T., and a family therapist, social worker, or counselor

5. experience working with both peer models and special needs children at a variety of developmental levels;

6. experience with curriculum development and implementation

7. facilitation of communicative competence

8. Promoting naturalistic interactions with parents and families

9. on-going training process for the staff as well as the trainees.

In closing: The teachers and administrators interviewed were asked to share the most important lessons they learned from their experience with mainstreaming. Perhaps

[1]The term educator refers to any adult working in the classroom with young children - therapist, parent, teacher, etc.

the most critical aspect is the unanimous feeling that the children are children first and that some may need extra support because of their special needs. The strong belief is that the mainstreamed classroom should provide the best of early childhood for every child! The CLC strives to maintain a constant awareness of each child's physical, social, communicative, and emotional comfort and safety as well as providing the cognitive challenge. The environment "speaks" to the children - the areas in the room are clearly defined and the materials carefully displayed and organized. Another important series of lessons/beliefs is that the major part of learning must be through self selected, child centered play; that learning is enhanced when the classroom educators are a team of professionals who can share their expertise for the most beneficial program for all children; and that parents must be a vital part of that team. In the words of Nicholas Hobbs: "... parents have to be recognized as special educators, the true experts on their children; and professional people... teachers, therapists, pediatricians, psychologists and others... have to learn to be consultants to parents." These critical lessons were the outcome and impetus for the Developmental Interaction approach to training.

V. TEACHER/DIRECTOR EVALUATIONS

Teacher Evaluations

Purpose: The purpose of this evaluation procedure shall be to encourage all staff to monitor their personal and professional growth.

Goals: Our goals shall be:

I. To assess our individual and team ability to provide:

A. a high quality developmental program for mainstreamed preschoolers from 2 1/2 to 5 years of age.

B. a support system to our parents.

C. a training facility for graduate and undergraduate students in the department and across campus.

II. To create a vehicle for open two-way feedback between director and staff for the continued personal growth and effective job performance of all team members.

Procedure:

A. semi-annual written evaluations of each staff member (director and teachers) will be completed at the end of the fall quarter and the end of the spring quarter. This form will also include a section for self evaluation.

B. individual conferences

1. Fall: two or three areas for focus will be identified and a plan of action agreed upon.
2. Winter: Review and assessment of focus areas will occur at end of winter quarter.
3. Spring: Final evaluations will be in written form with a follow-up personal conference to reflect on the year and to set or re-establish goals for future.
4. Team meetings will continue throughout the year to assess our program goals and to develop all aspects of the overall curriculum.

Staff Evaluation Worksheet

Staff Member:
Position:
Date:
Evaluator:

I. Implementation of Classroom Goals:

A. Relationships: The preschool is a living laboratory of human relationships. Effective work with people is critical to program success.

Children:

Parents:

Staff/Team:

Students:

Visitors:

B. Curriculum Development: The curriculum in preschool encourages children to be actively involved in the learning process, to experience a variety of developmental appropriate activities and materials, and to pursue their own interests with support.

Planning:

Activities/Implementation:

Art:

Science:

Manipulatives:

Creative Dramatics:

Music/Movements:

Sensory:

Group:

Transitions:

Snack:

Outside:

Record Keeping:

C. Environment: The arrangement of space is important because it affects everything the children do. It affects the degree to which they cay be active, the choices they make, and the ease with which they can carry out their plans. It affects their relationship with other people and the ways in which they use materials.

General responsibilities:

Implementation of environmental goals:
(Including individual and group needs)

II. Personal Style:

Who you are has so much to do with how you teach.

Commitment and attitude:

Guidance techniques:

Resourcefulness and organizational abilities:

Allocation of time:

Professional pursuits:

III. Implementing of Program Goals:

Support to total program: (the 3 M's of program underpinnings: The mechanics, the maintenance, and the mundane)

Course work:

Department responsibilities:

Grant involvement:

COMMENT:

IV. Self Evaluation:

V.	Focus Area	Plan of Action
	1	
	2	
	3	

VI. COMMENTS:

Director Evaluation Worksheet

Director:
Date:
Evaluator:

I. Administration

A. Setting Goals and Objectives:

B. Supervisory Skills and Relationships:

Staff:

Students:

Children: (classroom supervision and participation)

C. Parent Involvement/Activities

D. Property Management:

Preschool:

Child:

E. Budgetary Matters, Record Keeping, Government Affairs, and Fundraising:

II. Personal Style:

A. Commitment and Attitude

B. Guidance Techniques:

C. Resourcefulness and Organizational Abilities:

D. Productivity of Meetings:

E. Dependability:

F. Communication Skills:

G. Professional Pursuits:

III. Implementation of Program Goals:

A. Ability to Convey our Message

B. Leadership Qualities

C. Course Work:

D. Department Responsibilities:

E. Grant Responsibilities:

F. Program Evaluation:

IV. Self Evaluation:

Comments:

VI. Parent Program Evaluation Form

Date:_____ Age of Child_____

Rating Code: Unsatisfactory = 1
Satisfactory - = 2
Satisfactory = 3
Satisfactory + = 4
Outstanding = 5

1. _____What is your overall attitude toward your child's program?

2. _____How well do you think the program meets your child's needs?

3. _____How well does the program meet your family needs?

4. _____Do you feel that your opinions are sought and count in decision-making?

5. _____When you express a need or concern to a staff member do you feel there is some action taken?

6. _____Do you feel it has been beneficial to have your child in a mainstreamed setting?

7. _____Do you feel the team has been able to work effectively with your child?

8. _____Do you feel there is adequate communication between home and school?

Comments/Suggestions for strengthening the CLC program:

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